STATEMENT OF ORGANIZATION
28 2GH
POR BORIETAL ACTION COMMITTEES AND PARTY COMMITTEES  (See Reverse Side For Instructions)  RECEIVE
This is a (check one) Party Committee Political Action Committee OCT 2 6 2004  This is an (check one) Initial Statement Amended Statement
COMMITTEE SAS GRE MOURDS ASISSADE ATVIENDY
Name/GREY-PAC
Mailing Address (Street, City, State, Zip Code)  Mailing Address (Street, City, State, Zip Code)
CHAIRPERSON Name Home Telephone
1 PACEY (NUNEL (705) 7/2-5965
Mailing Address (Street, City, State, Zip Code)  Z 3 5 0 E Den 12 0, Abilen 45 ()
TREASURER  Name Home Telephone
1 1 1 1 AM 1 AM 1 N (785) 7(3-5509)
Mailing Address (Street, City, State, Zip Code) 1931 HAWK RD, Abilence K5 (741Business Telephone
AFFILIATED OR CONNECTED ORGANIZATIONS
Name ZANSAS GREY hours ASSN
Mailing Address (Street, City, State, Zip Code) 11 010 40, Abilene KS 67410
If not connected or affiliated with an organization, identify the trade, profession, or primary interest of the contributors.
SIGNATURE:
"I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor."
(Date)  2000 (Signature of Chairperson)
Governmental Ethics Commission Rev.2000

Rev.2000